Fees Paid (\$)

6 Wholer the Paperwork Red	# a an 12/00/	2024		- · · · · · · · · · · · · · · · · · · ·	n of information unle		$\overline{}$	
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known				
EEE TE	ANG	NAITT A I	-	Application Number	09/875,774			
		MITTAL	-	Filing Date	June 6, 2001			
	FY 2			First Named Inventor	сном			
Applicant claims sma	all entity star	tus. See 37 CFR	1.27	Examiner Name	J. A. Fox		, ,,,	
				Art Unit 2664			No. of the Control of	
TOTAL AMOUNT OF PAYMENT (\$) 1,200				Attorney Docket No.	ATT 2000-0445			
METHOD OF PAYMEN	IT (check a	ill that apply)						
Check Credit (Card 🔲 N	Noney Order [] None [Other (please	identify) :			
Deposit Account D	eposit Acco	unt Number: 20-0	782	Deposit Acco	ount Name: Mose	er, Patterson & SI	neridan	
For the above-ic	lentified dep	osit account, the	Director is h	ereby authorized to:	(check all that ap	ply)		
⊠ Charge fe	e(s) indicate	ed below		☐ Chai	rge fee(s) indicate	ed below, except	for the filing fee	
		I fee(s) or underp	avments of	fee(s) X Cred	dit any overpayme	ents		
Under 37	7 CFR 1.16 a	and 1.17	•	• • •				
VARNING: Information on the formation and authorization and authorization			redit card info	ormation should not b	e included on this	form. Provide cred	dit card	
EE CALCULATION							<u> </u>	
. BASIC FILING, SE	ARCH AN	D FXAMINATIO	ON FFFS					
. 570.0112.110, 02.				RCH FEES	EXAMIN	ATION FEES		
	- (4)	Small Entity	_	Small Entit		Small Entity	F D-1-1 (6)	
Application Type	Fee (\$)	Fee(\$)	Fee:		<u>Fee(\$)</u>	<u>Fee(\$)</u>	Fees Paid (\$)	
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65 80		
Plant	200	100 150	300 500	150 250	160 600	80 300		
Reissue	300	100	500	250 0	0	0		
Provisional	200	100	U	U	. 0	-		
. EXCESS CLAIM FI	:ES						Small Entity	
Fee Description Each claim over 20 ((including E	Poissups)				<u>Fee (\$)</u> 50	<u>Fee (\$)</u> 25	
Each independent of			sues)			200	100	
Multiple dependent		(,			360	180	
Total Claims	Extra C	Claims <u>Fe</u>	<u>e(\$)</u>	Fee Paid (\$)		Multiple D	Dependent Claims	
	'= <u>0</u>	x	=			<u>Fee (\$)</u>	Fee Paid (\$)	
23 -23 or HP		aid for, if greater tha	an 20.			<u>.</u>		
23 -23 or HP HP = highest number of	total claims p		(A)	Eco Boid (\$)				
	total claims pa Extra C	· -	<u>e(\$)</u>	Fee Paid (\$)				
HP = highest number of	Extra C	· -		1,200				
HP = highest number of Indep. Claims	<u>Extra 0</u> = <u>6</u>	Claims Fee	= 0					
HP = highest number of Indep. Claims 9 - 3 or HP HP = highest number of	Extra C = 6 findependent E FEE	Claims Fee x 20 claims paid for, if gr	eater than 3.	<u>1,200</u>				
HP = highest number of Indep. Claims 9 - 3 or HP HP = highest number of APPLICATION SIZE If the specification and	Extra 0 = 6 findependent EFEE d drawings	Claims Fee x 20 claims paid for, if green exceed 100 she	eater than 3.	1,200 per (excluding elec				
HP = highest number of Indep. Claims 9 - 3 or HP = highest number of APPLICATION SIZE If the specification and listings under 3	Extra C = 6 findependent E FEE d drawings 37 CFR 1.5	x 20 claims paid for, if gr exceed 100 she 52(e)), the applic	eets of pap cation size	<u>1,200</u>	\$125 for small e			

SUBMITTED BY					
Signature	2/2/1/2	Registration No. (Attorney/Agent)	39,400	Telephone	(732) 530-9404
Name (Print/Type)	KIN-WAH TONG			Date	April 88 , 2005

____ (round up to a whole number) x

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

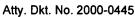
- 100 =

Other (e.g., late filing surcharge):

4. OTHER FEE(S)

/ 50 =

Non-English Specification, \$130 fee (no small entity discount)





IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

ଊଊଊଊଊଊଊଊଊଊଊଊଊଊ

In re Application of:

Albert T. Chow, et al.

Serial No.: 09/875,774

Confirmation No.: 7353

Filed:

June 6, 2001

For:

METHOD FOR PROVIDING DISTRIBUTED WIRED AND WIRELESS PACKET/CELL NETWORKING VIA ATM

MAIL STOP Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Group Art Unit: 2664

Examiner: Jamal A Fox

CERTIFICATE OF TRANSMISSION 37 CFR 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on ____April 22, 2005

April 22, 2005

Date

Signature

RESPONSE TO OFFICE ACTION DATED JANUARY 25, 2005

In response to the Office Action dated January 25, 2005, having a shortened statutory period for response set to expire on April 25, 2005, please enter this response and reconsider the claims pending in the application for reasons discussed below. Applicants believe that additional fees are due in connection with this response, and the Commissioner is hereby authorized to charge counsel's Deposit Account No. 20-0782/ATT/2000-0445, for any fees, including extension of time fees or excess claim fees, required to make this response timely and acceptable to the Office.

04/26/2005 SHRSSEN1 00000016 200782 09875774

01 FC:1201

1200.00 DA